

Burgess Hill Urban District  
Council.



ANNUAL REPORT

OF THE

Medical Officer of Health

For the Year 1946.

BY

WILLIAM B. STOTT,  
L.R.C.P. & S. (Edin.), D.P.H. (Camb.).

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E. S. Burnett, Printer, Burgess Hill.

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## URBAN DISTRICT COUNCIL OF BURGESS HILL.

# REPORT OF

## THE MEDICAL OFFICER OF HEALTH.

To the Chairman and Members of the Burgess Hill Urban District Council.

I have the honour to submit my Annual Report for the year 1946.

The Crude Death Rate is 14.81 as compared with 11.50 for the previous year and with 11.5 for England and Wales. It will be observed that the rate is higher than that for England and Wales, but the crude death rate is not a true criterion of the health of the people living in a district, as it does not take into account the age and sex of the inhabitants. This factor is taken into account in a "Corrected Death Rate," which is obtained by multiplying the crude death rate by a figure supplied by the Registrar-General. Since the war, however, this figure has not been supplied to local authorities. The Infantile Mortality Rate is 41.38.

No deaths occurred during the year from typhoid fever, scarlet fever, diphtheria, whooping cough or measles.

### DIPHTHERIA IMMUNISATION.

Set out below are particulars of the complete scheme as carried out in this district.

#### Pre-School Children.

**Information regarding Children :** Particulars of children born in the area are received in a weekly return from the Registrar-General; those outside the area from the County Medical Officer of Health and District Nurses. Notifications of transfers into the district are also received from the Medical Officers of Health of the area concerned. A form is sent to the respective Medical Officer of Health asking for particulars of immunisation of the child.

**Records :** A card is made out for every child when it becomes nine months old, and for every new entrant into the district.

Blank cards are sent to the County Public Health Department, who fill in name, address, and date of birth of children born outside the district, or who have come from another area, and these are returned to this office periodically.

Cards are kept in containers (ordinary office filing boxes), each nurse's area having a separate one. These are divided by tabbed cards into the following categories.

Awaiting 1st injection	Schick test positives
Awaiting 2nd injection	Completed (in year groups)
Awaiting Schick test	Refusals

These filing boxes are kept by the immunisation clerk at the Council Offices.

As each child reaches the age of five years its card is transferred to an alphabetical filing cabinet "Awaiting Particulars" until information is received that the child has entered a school; the card is then transferred to the school container (see below). After a period of six months, if no information is received from the school in respect of a child, a letter is sent to the parent asking which school the child is attending. When a request for particulars of immunisation is received from the medical officer of health of a district to which the child has removed a copy of the child's card is dispatched. Finally, there is a cabinet or "Dead File" for cards of children who have left the district.

**Procedure :** A letter containing explanatory leaflets with a stamped acceptance form enclosed is sent to the parent when the child is nine months old. Consent forms when received are fastened to the respective cards so that no child is inadvertently treated against the parent's wishes.

Parents are given the opportunity of taking their children to their own doctor or attending a clinic. Blank cards are sent to all general practitioners for completion in respect of children immunised by them. These cards are returned to this office, and payment is then made by the Council to the general practitioner at the rate of 3/- per injection (6/- per child) unless payment has been arranged privately with the parents. The district nurse is contacted, and a clinic is arranged. A list of children requiring treatment is sent to the district nurse, also a list of children whose parents have not returned the consent form, in order that she may visit and persuade the parent to agree to immunisation. Check on whether children taken to their own doctors have been done, and whether the doctor has completed the record, is secured by the immunisation clerk frequently going through the "Awaiting 1st injection" and other sections of the filing boxes, and by her meeting the district nurses.

**Attendance at Clinics :** Clinics are held at the Welfare Centre. Injections and tests at these clinics are all performed by Dr. Duke. The immunisation clerk attends in order to check the list previously sent to the district nurse, and to ascertain particulars of children who have come into her area, and the reason for non-attendance of other children. Parents are sent a post card informing them of the place and time of these clinics (transport by W.V.S. car service may be needed on occasions). Two injections of .3 cc A.P.T. each are given at monthly intervals. Children whose parents have refused treatment or who have not attended a clinic when requested to do so are visited by Dr. Duke, who endeavours to obtain the consent of the parent to immunise the child in the home. Now that refusals are down to the hard core of 5 per cent. or less this involves fewer special journeys; but in the earlier stages of the scheme such visits were a very important feature of the scheme.

**The Schick Test :** All children are Schick tested at ordinary sessions approximately three months after the second injection and the reading carried out seven days later. Positives are given a further injection of .3 cc followed by another Schick test three months later. Children are re-tested at 5 years of age, and again at 10; positives receive a further injection. In order to obtain uniformity throughout the district, all testing is carried out by Dr. Duke. Experience has shown, however, that it is possible to use for reading the tests one or two really skilful nurses who have become fully acquainted with Dr. Duke's methods and the difficulties which may arise. In spite of this, every test which has been read by a nurse on behalf of Dr. Duke is recorded on the card as (N). A letter is sent to the parents of children immunised by their own doctor pointing out the advisability of the Schick test, and informing them of the time and place of the clinic where this can be performed.

### School Children.

**Elementary Schools :** Cards of all school children are kept in containers one for each school (also kept at the office), the sub-divisions being the same as those of the pre-school children. At the beginning of each term, a form is sent to the head teacher asking for a list of new admissions and leavers. When this is returned, the cards of children are traced, and a list of children requiring treatment is sent to the head teacher. The cards of children who have left are, of course, taken from the school con-

tainer ; if the children have left at 15 years of age the cards are filed in a "Dead File"; if they have left between the ages of 5 to 14 years the parent is written to asking which school the child is attending ; in the meantime the cards are filed in the cabinet "Awaiting Particulars."

A visit to the school is arranged and all new admissions Schick tested. Those found to be positive are given a note asking the parents' consent to a further injection at the next school clinic. Children not previously immunised are given injections at the same time, provided that the parents have consented.

**Private Schools :** All private schools in the district are visited at regular intervals for the purpose of testing the children. Those found to be positive are given a letter recommending a further injection. Cards are made out as for elementary school children, and a container is kept for each school.

As contact was made at an early stage with all the doctors looking after private schools easy co-operation has been assured, and it is known in each case whether the doctor wishes to carry out for himself (a) the immunisation and/or (b) the Schick testing.

#### Cases of Diphtheria.

Details, as complete as possible, are collected of every case or probable case of diphtheria, including age, whether previously immunised (if so, date(s) of injection, results of any Schick tests, nature and make of antigen used, where done) and clinical particulars (type of organism, whether other severe infection present, whether severe, moderate or mild case, recovery prompt or slow, any complications and/or sequelae, whether recovery ultimately complete, and so on).

#### RESULTS OF SCHEME.

Particulars are given below of the results at 31st December, 1946.

1-5 years. 5-15 years.

Number of children	..	..	517	1,307
Number immunised	..	..	509	1,263
Percentage immunised	..	..	98	96

Name of School.	Number on Roll.	Number Immunised.	Percentage.
Junction Road Primary Council	296	289	98
London Road Primary Council	250	241	96
London Road County Modern	303	289	95
Children 5-15 years not on any roll .....	849	819	96
	169	162	96
Totals .....	1,018	981	96

During the year 123 children were immunised and 788 Schick tested. For the second year in succession not a single case of diphtheria occurred.

### Research :

In my Report for 1945 mention was made of the commencement of a scheme to test and immunise expectant mothers with a view to discovering if the immunity in the mother is passed on to the infant and if so whether that immunity would last for twelve months.

There were 123 expectant mothers tested at the fifth month of pregnancy, 84 being positive, or susceptible to diphtheria, and 39 negative. Those found to be positive were immunised by three doses of T.A.F. In addition, 545 mothers were tested following the birth of the child, 319 being positive and 226 negative.

Up to the present it has only been possible to test 46 babies between the ages of 6-12 months whose mothers were Chick negative. Of these, 38 were tested at 10-12 months, only 4 being negative ; 8 were tested at 6-9 months, 2 being negative. These figures are, of course, statistically insufficient to draw a firm conclusion, but it would seem that infants do not retain inherited immunity for more than ten months. We now have to find out if the immunity will be retained for six months, and in the future it is proposed to test all the children about the sixth month.

All the testing and test readings throughout the area has been carried out by Dr. Duke, Deputy Medical Officer of Health, and he also gave the majority of the inoculations. It is mainly due to his efforts and those of Miss Dean, Immunisation Clerk, that the scheme runs so smoothly and efficiently.

### MID-SUSSEX ISOLATION HOSPITAL.

This hospital, which served the needs of the Cuckfield Rural, Cuckfield Urban and Burgess Hill Urban Districts, was administered by a Joint Board consisting of members appointed by the three constituent authorities. The hospital had to be closed in August due to difficulties in obtaining nursing and domestic staff, and as a result the number of patients treated during the year was considerably less than in 1945—57 patients as compared with 95.

Only one case of diphtheria was admitted, a child from the Cuckfield Urban District who had been immunised in 1940. The case was a mild one.

Following a suggestion to amalgamate the hospital with the High Grove Isolation Hospital, East Grinstead, which served the Uckfield Rural and East Grinstead Urban Districts, a meeting was held between representatives of both Hospital Management Committees. At this joint meeting it was agreed that amalgamation was desirable, and it was recommended to the constituent authorities to go fully into the matter, including the closure of the High Grove Hospital and the re-opening of the Mid-Sussex Hospital to serve the whole area. The population of the joint area was 93,809, so that with 40 beds available at the hospital this was equivalent to one bed for 2,345 of the population. I gave the opinion that in view of the number of cubicle beds (twelve) and the large percentage of the child population immunised against diphtheria—over 90 per cent. throughout the area—this hospital was large enough to meet the normal needs of the five districts. All the Councils passed resolutions agreeing to the proposals, and the Minister of Health made an Order constituting a new Joint Hospital Board, consisting of members appointed by the five constituent authorities.

The Matron and Staff of the High Grove Hospital were transferred to this Hospital in November, and re-opening for patients took place a few weeks later.

At the time of writing, the Hospital has been open for several months ; so far the number of beds has proved adequate, two wards only having to be opened and one of these only for a few weeks ; the staff position is satisfactory ; no difficulties have arisen in fetching patients by ambulance (two are available) although the distance to parts of the district are much further than previously. It was fortunate that Matron and Sister were willing to be transferred from High Grove, as main credit for the smooth administration of the hospital since it was re-opened is due to their efforts, and my best thanks are due to them for their co-operation.

I should also like to take this opportunity of paying a tribute to Dr. Ralph Green, visiting physician, for his unfailing attendance at the hospital and for the great care and attention which he gives to the patients.

## SCABIES.

Scabies was made notifiable in 1943, and this has proved to be of great assistance in dealing with the disease. The number of cases has decreased from 49 to 34 in 1946. The type of case now being treated is much less severe than formerly, due to the general practitioners and the general public being more conversant with the symptoms, with the result that patients are now seen earlier.

## ICE-CREAM (HEAT TREATMENT) REGULATIONS, 1946.

A draft form of the above Regulations was sent to Local Authorities in October and this Council, after considering a memorandum submitted by the Medical Officer of Health on the subject, made representations to the Ministry for strengthening the Regulations.

Revised Regulations were sent to local authorities early in the present year and they came into force on 1st May, 1947. Although the Minister has not included all the items suggested by this Council, he has included the provisions relating to indicating and recording thermometers and for the records to be kept for one month. He also included a requirement that ice-cream during its manufacture, storage and distribution shall be at all times protected from contamination, and also that all apparatus and utensils brought into contact with it shall be cleansed immediately after use and kept clean at all times (Regulation 5). He has not been willing to make a statutory bacteriological test but draws attention to a form of methylene blue test. It is suggested that this test of bacterial cleanliness appears to provide the best available for the present purpose. At the same time it is simple and cheap to perform. It is suggested that if out of the four grades recommended, ice-cream consistently fails to reach grades one and two, it would be reasonable to regard this as indicating defects of manufacture or of handling which call for further investigation. On the whole the Regulations are a great advance on the draft form and it is pleasing to find that the Minister has met many of the points raised by this Council.

## HOUSING.

The housing situation in the district deteriorated during the year in that there was more overcrowding and more families living with relations. The number of applicants for Council houses had increased from 150 in 1945 to 225 by the end of 1946. Every effort was made to increase accommodation by requisitioning empty properties, and there are now 57 families in requisitioned houses.

The Council are erecting 28 houses in St. Andrew's Road, but none was completed in 1946, and have also started on the building of a further 64 houses in the West Park Estate.

Most of the work in connection with requisitioning, interviewing, visiting and classifying applicants, keeping of records and other emergency housing work has been carried out by the Sanitary Inspector, who has devoted a good deal of time to this work. The applicants are first classified by means of a system of "Points," the final selection being made by a Sub-Committee after consideration of all the circumstances.

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My thanks are due to Mr. J. W. Hobson, Sanitary Inspector, for his co-operation in the work of the department and to Miss Everson, my Chief Clerk. I also wish to express my appreciation of the consideration and support I have received from the Chairman and Members of the Public Health Committee.

I have the honour to be, Ladies and Gentlemen,

Your obedient Servant,

W. B. STOTT,

*Medical Officer of Health.*

## STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

## Summary of Statistics for the Years 1939, 1945 and 1946.

		1939.	1945.	1946.
Area of District in Acres ..	..	2,024	2,024	2,024
Population estimated to middle of year ..	..	6,917	7,476	7,763
Rateable Value ..	..	£59,302	£60,167	£61,191
Sum represented by a Penny Rate ..	..	£232 10s.	£240	£240
Density of Population (persons per acre) ..	..	3.42	3.69	3.83
Number of Houses ..	..	2,177	2,258	2,288
Birth Rate per 1,000 population ..	..	12.56	17.21	18.68
Death Rate per 1,000 population ..	..	14.24	11.50	14.81
Infantile Mortality Rate ..	..	65.9	39.06	41.38

## CAUSES OF DEATH IN BURGESS HILL URBAN DISTRICT.

CAUSE OF DEATH.		MALES.	FEMALES.
1. Typhoid and Paratyphoid Fevers ..	..	..	—
2. Cerebro-Spinal Fever ..	..	—	—
3. Scarlet Fever ..	..	—	—
4. Whooping Cough ..	..	—	—
5. Diphtheria ..	..	—	—
6. Tuberculosis of Respiratory System ..	..	2	—
7. Other forms of Tuberculosis ..	..	—	—
8. Syphilitic Diseases ..	..	—	—
9. Influenza ..	..	—	1
10. Measles ..	..	—	—
11. Acute Poliomyelitis and Polio-encephalitis ..	..	—	—
12. Acute Inf. Encephalitis ..	..	—	—
13. Cancer of B. Cav. and Oesoph. (male), Uterus (female) ..	..	—	1
14. Cancer of Stomach and Duodenum ..	..	1	—
15. Cancer of Breast ..	..	—	2
16. Cancer of all other sites ..	..	8	6
17. Diabetes ..	..	—	—
18. Intra. Cran. Vasc. Lesions ..	..	6	11
19. Heart Disease ..	..	16	24
20. Other Diseases of Circulatory System ..	..	1	2
21. Bronchitis ..	..	—	2
22. Pneumonia ..	..	1	—
23. Other Respiratory Diseases ..	..	—	—
24. Ulcer of Stomach or Duodenum ..	..	1	—
25. Diarrhoea under 2 years ..	..	—	—
26. Appendicitis ..	..	—	—
27. Other Digestive Diseases ..	..	1	1
28. Nephritis ..	..	4	3
29. Puerperal and Post Abor. Sepsis ..	..	—	—
30. Other Maternal Causes ..	..	—	—
31. Premature Birth ..	..	—	1
32. Con. Mal. Birth Inj. Infant Dis. ..	..	2	2
33. Suicide ..	..	—	—
34. Road Traffic Accidents ..	..	—	—
35. Other Violent Causes ..	..	2	—
36. All other Causes ..	..	6	8
Totals ..	..	51	64

BIRTH RATE, CIVILIAN DEATH RATE AND ANNUAL ANALYSIS OF MORTALITY  
During the Year 1946 (Provisional Figures).

	RATE PER 1,000 CIVILIAN POPULATION.	ANNUAL DEATH RATE PER 1,000 CIVILIAN POPULATION.								RATE PER 1,000 LIVE BIRTHS.		
		Live Births	All Causes	Typhoid and Paratyphoid Fever	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Small-Pox	Measles	Diphtheritis (Under 2 years)	Total Deaths (Under 1 year)
England and Wales .....	19.1	0.53	11.5	0.00	0.00	0.02	0.01	0.15	0.00	0.00	4.4	43
126 County Boroughs and Great Towns, including London .....	22.2	0.67	12.7	0.00	0.00	0.02	0.01	0.13	0.00	0.01	6.1	46
148 Smaller Towns (Resident Popu- lation 25,000 to 50,000 at 1931 Census) .....	21.3	0.59	11.7	0.00	0.00	0.02	0.01	0.14	0.00	0.00	2.8	37
London .....	21.5	0.54	12.7	0.00	0.00	0.02	0.01	0.12	—	0.01	4.2	41
Burgess Hill Urban .....	18.68	0.26	14.81	—	—	—	—	—	—	0.13	—	41.38

The Maternal Mortality Rates for England and Wales are as follows :—Per 1,000 Total Births  
The Maternal Mortality Rates for the Burgess Hill Urban District are as follows .. ..  
Puerperal Sepsis. Others. Total.  
Nil 1.06 1.24  
Nil Nil Nil

## BIRTHS AND DEATHS.

## Births and Birth Rate.

The following Table shows the Births registered for the year 1946 :—

		<i>Male.</i>		<i>Female.</i>		<i>Total.</i>
Legitimate	..	70	..	65	..	135
Illegitimate	..	5	..	5	..	10
Total	..	75	..	70	..	145

This gives a rate of 18.68 per 1,000 population.

		<i>Male.</i>		<i>Female.</i>		<i>Total.</i>
Total	Stillbirths	..	2	..	—	..
Legitimate	..	2	..	—	..	2
Illegitimate	..	—	..	—	..	—

## Deaths and Death Rate.

The following Table shows the Deaths registered for the year 1946 :—

<i>Male.</i>		<i>Female.</i>		<i>Total.</i>
51	..	64	..	115

This gives a mortality rate of 14.81 per 1,000 population.

## SUMMARY OF INSPECTIONS.

## Housing.

Under Housing Acts .. .. .. ..	2
Under Public Health Acts .. .. .. ..	308
Re-visits .. .. .. ..	383
	— 693

## Public Health Acts.

Infectious Disease .. .. .. ..	43
Premises Disinfected .. .. .. ..	5
Infestations dealt with .. .. .. ..	22
Drainage work .. .. .. ..	8
Drains tested .. .. .. ..	60
	— 138

## Food Premises.

Bakehouses .. .. .. ..	12
Slaughterhouses .. .. .. ..	1
Ice-Cream Premises .. .. .. ..	42
Various .. .. .. ..	18
	— 73

## Food Inspection .. .. .. ..

97

## Milk and Dairies.

Cowsheds .. .. .. ..	20
Dairies .. .. .. ..	24
	— 44

## Trade Premises.

Factories—Mech. Power .. .. .. ..	5
do. Non. Mech. .. .. .. ..	4
Petroleum Acts .. .. .. ..	8
	— 17

## Miscellaneous.

Water Supplies .. .. .. ..	5
Rats and Mice (made by Rodent Operator) .. .. .. ..	3,493
Emergency Housing .. .. .. ..	234
Miscellaneous .. .. .. ..	126
Keeping of Animals .. .. .. ..	2
Accumulations .. .. .. ..	12
Swimming Pool .. .. .. ..	15
Watercourses .. .. .. ..	3
Tents, Vans and Sheds .. .. .. ..	4
Smoke Observations .. .. .. ..	6
Smoke Nuisances .. .. .. ..	2
Interviews .. .. .. ..	172
	— 4,074

Total Visits .. .. .. ..

5,136

**Samples Taken.**

Drinking Water (Mains) .. .. .. ..	4
Swimming Pool .. .. .. ..	4
do. tested on spot .. .. .. ..	12
Ice-Cream .. .. .. ..	13
	—
	33

**Overcrowding.**

Cases of overcrowding abated .. .. .. ..	19
--	----

**COMPLAINTS.**

During the year 126 complaints were received, dealing with the following matters :—

Housing Defects .. .. .. ..	78
Drainage .. .. .. ..	26
Accumulations .. .. .. ..	9
Infestations (Various) .. .. .. ..	9
Miscellaneous .. .. .. ..	5

**NOTICES.**

Number of notices outstanding at end of 1945 ..	89
Number of notices served during 1946—	
(a) Preliminary .. .. .. ..	102
(b) Statutory .. .. .. ..	3
(c) Verbal .. .. .. ..	84
	—
	278
Number of notices complied with during 1946 ..	.. 115
Number of notices outstanding at end of 1946 ..	.. 163
Number of reminders sent .. .. .. ..	.. 30

**SUMMARY OF WORK CARRIED OUT AS A RESULT OF NOTICES.****Drainage.**

New drains laid .. .. .. ..	8
New manholes constructed .. .. .. ..	5
Sections of drain relaid .. .. .. ..	8
Manholes reconstructed .. .. .. ..	3
New manhole covers fixed .. .. .. ..	1
Drains repaired .. .. .. ..	2
Drains unstopped .. .. .. ..	47
New Gullies fixed .. .. .. ..	2
Concrete surrounds provided to gullies .. .. .. ..	2
Cesspools emptied .. .. .. ..	13
Sink and bath wastes repaired or renewed .. .. .. ..	6
New soil pipes .. .. .. ..	2
New baths, lavatory basins and sinks .. .. .. ..	11

**Sanitary Conveniences.**

New W.C.s provided	..	..	..	5
W.C. pans renewed or repaired	..	..	..	11
W.C. seats renewed or repaired	..	..	..	5
W.C. box seats abolished	..	..	..	3
W.C. cisterns repaired or renewed	..	..	..	9
Water supply pipes repaired or renewed	..	..	..	5
W.C. apartments cleansed	..	..	..	6
do.      walls repaired	..	..	..	3
do.      roofs repaired	..	..	..	5
do.      floors repaired or renewed	..	..	..	2

**General.**

New dustbins provided	..	..	..	23
Walls internal repaired	..	..	..	29
do.      cleansed	..	..	..	22
Ceilings repaired	..	..	..	19
do.      cleansed	..	..	..	13
Ranges and coppers repaired or renewed	..	..	..	15
Windows, frames and sills repaired	..	..	..	14
Doors repaired	..	..	..	6
Floors repaired	..	..	..	13
Staircases repaired	..	..	..	2
Roofs repaired	..	..	..	14
External walls repaired	..	..	..	3
Chimney stacks repaired	..	..	..	2
Eaves gutters and rain-water pipes repaired or renewed	..	..	..	16
Damp walls treated	..	..	..	5
Additional airbricks fixed	..	..	..	3
Dirty premises cleansed	..	..	..	1
Vans provided with water supply	..	..	..	1
Yard paving repaired	..	..	..	1
Yards cleansed	..	..	..	6

**WATER SUPPLIES.**

The water supply of the district, provided by the Burgess Hill Water Company, has continued to be satisfactory in quality and quantity. Regular sampling has ensured that the water has reached the desired standard of bacterial quality.

There is no change to report in the position of the six premises on Ditchling Common which are supplied with water from three shallow wells.

The negotiations which were in hand between the owners and the Council have reached a deadlock owing to the inability of one of the owners to undertake the financial liability involved.

**DRAINAGE.**

The position with regard to the proposed new sewer in Folders Lane is exactly where it was a year ago, when it was reported that the overflowing cesspools continued to cause nuisances. A number of new bungalows are proposed for this area, some being already completed, whilst work is in progress on others.

This is bound to give rise to further nuisances, and it is urged most strongly that the sewerage scheme should be put in hand without further delay.

## RATS AND MICE.

The rodent operator has been kept fully employed in dealing with complaints of rats and mice.

The Council's own premises have received attention, the refuse tip having received periodical treatment, whilst a test baiting of the sewer system was carried out during the year.

This test, however, showed only very slight infestation of the sewers in one part of the district and this section is to receive attention.

During the year a special scheme was adopted for the treatment of private dwellings without cost to the occupier. This scheme was sponsored by the Ministry of Food, which undertook to bear a proportion of the cost.

A comprehensive survey of the whole district was commenced, which brought to light a large number of minor infestations which otherwise would probably not have been reported.

The visits of the operator in making the survey should have the effect of encouraging occupiers to report the presence of rats and mice in the future, whilst the carrying out of thorough treatments when necessary, together with sound advice on how to make their premises rat proof, should benefit them when the scheme for free treatment comes to an end.

During the year 74 complaints were received and 3,493 visits were made to 1,402 separate premises. 159 infestations were found and dealt with. The estimated kill being 3,197, the number of bodies actually found being 343.

## INSPECTION AND SUPERVISION OF MILK AND FOOD SUPPLIES.

### Milk Production.

Number of Cowkeepers on the register	..	..	13
Approximate number of milch cows	..	..	220
Number of Inspections	..	..	20
Number of Accredited producers	..	..	5
Number of "Tuberculin Tested" producers	..	..	1

### Retail Dairies.

Number of retailers on register	..	..	9
"    retail dairies	..	..	8
"    inspections	..	..	24

### Licences granted under Milk (Special Designations) Order, 1935.

Tuberculin Tested (Dealers Bottling)	..	..	2
do.                  do. (Dealers)	..	..	1
do.                  do. (Supplementary)	..	..	1
Pasteurised (Bottlers and Dealers)	..	..	2
do.                  (Supplementary)	..	..	1

### SAMPLING.

#### (a) Bacteriological examination.

Number of samples taken	..	..	71
Number satisfactory	..	..	65
Number unsatisfactory	..	..	6

#### (b) Biological test for T.B.

Number of samples taken	..	..	42
Number satisfactory	..	..	42
Number unsatisfactory	..	..	—

#### (c) Phosphatase Test.

Number of samples taken	..	..	11
Number satisfactory	..	..	10
Number unsatisfactory	..	..	1

## MEAT AND FOOD INSPECTIONS.

## Meat.

One slaughterhouse only is licensed, and is used for the occasional slaughter of pigs under Ministry of Food licences.

The number of animals slaughtered in the year was 44 pigs and 1 goat. Six heads and 1 set of offals were condemned on account of disease.

## Food.

Ninety-seven visits were made to various premises for the purpose of food inspection, and the following list shows the amount of foods of various kinds condemned :—

Beef, Mutton and Lamb	..	..	98	lbs.
Fish	..	..	2,348	"
Pigs' heads and offal	..	..	134	"
Ox Livers	..	..	24	"
Bacon	..	..	4	"
Tinned Vegetables	..	..	78	"
do. Fish	..	..	50	"
do. Beef	..	..	170	"
do. Pork Products	..	..	5	"
do. Meat Products	..	..	9	"
do. Fruit	..	..	4	"
do. Milk	..	..	27	"
Preserves	..	..	34	"
Fruit	..	..	70	"
Cheese	..	..	14	"
Flour, etc.	..	..	31	"
Tea and Coffee	..	..	7	"
Puddings	..	..	5	"
Bread	..	..	175	"
Butter	..	..	37	"
Sundries	..	..	16	"
Total			3,340	"

1 ton 9cwt. 3qr. 8lb.

## NOTIFICATIONS OF INFECTIOUS DISEASE.

Disease.	Total.	Admitted to Hospital.	Deaths.
Poliomyelitis .....	1	1	—
Erysipelas.....	1	—	—
Puerperal Pyrexia .....	1	—	—
Dysentery .....	1	1	—
Pneumonia .....	4	—	—
Measles.....	25	—	—
Whooping Cough .....	27	—	—
Scabies .....	12	—	—
 Totals .....	72	2	—

## INFECTIOUS DISEASE.

Notification Rates per 1,000 of the Population.

Notifications.	England and Wales.	Burgess Hill Urban.
Typhoid Fever .....	0.01	—
Paratyphoid Fever .....	0.02	—
Cerebro-Spinal Fever .....	0.05	—
Scarlet Fever.....	1.38	—
Whooping Cough.....	2.28	3.48
Diphtheria .....	0.28	—
Erysipelas .....	0.22	0.13
Smallpox .....	0.00	—
Measles .....	3.92	3.22
Pneumonia .....	0.89	0.52

## CASES OF INFECTIOUS DISEASE IN AGE GROUPS.

Disease.		Under 1 year	1 - 2	2 - 3	3 - 4	4 - 5	5 - 10	10 - 15	15 - 20	20 - 35	35 - 45	45 - 65	65 and over	Totals
Poliomyelitis .....	—	—	—	—	—	—	—	—	—	1	—	—	—	1
Erysipelas .....	—	—	—	—	—	—	—	—	—	—	—	1	—	1
Puerperal Pyrexia .....	—	—	—	—	—	—	—	—	—	1	—	—	—	1
Dysentery .....	—	—	—	—	—	1	—	—	—	—	—	—	—	1
Pneumonia .....	—	—	—	—	—	—	1	—	—	—	1	1	1	4
Measles .....	—	1	1	4	1	17	—	—	1	—	—	—	—	25
Whooping Cough .....	3	1	3	7	2	9	—	—	1	1	1	—	—	27
Scabies .....	—	—	1	—	—	1	2	1	3	2	.2	—	—	12
Totals .....	3	2	5	11	4	28	2	2	6	4	4	1	1	72

TUBERCULOSIS—NEW CASES AND MORTALITY, 1946.

Age Periods.	New Cases.				Deaths.			
	Respiratory.		Non-Respiratory.		Respiratory.		Non-Respiratory.	
	Males.	Females.	Males.	Females.	Males.	Females.	Males.	Females.
0 - 1 .....	-	-	-	-	-	-	-	-
1 - 5 .....	-	-	-	-	-	-	-	-
5 - 15 .....	-	-	-	-	2	-	-	-
15 - 25 .....	2	3	1	-	-	-	-	-
25 - 35 .....	-	-	1	-	-	-	-	-
35 - 45 .....	1	1	-	-	1	-	-	-
45 - 55 .....	1	-	-	-	1	-	-	-
55 - 65 .....	1	-	-	-	-	-	-	-
65 and over .....	-	-	-	-	-	-	-	-
TOTALS .....	5	4	2	2	2	-	-	-

## THE MID-SUSSEX ISOLATION HOSPITAL.

Appended below are details of cases admitted to the Hospital during the year.

Disease.	Cuckfield District	Rural	Cuckfield District	Urban	Burgess Hill Urban District	East Grinstead Urban District	Uckfield District	Rural District	Other Districts.	Total.
Diphtheria .....	—	—	1	—	—	—	—	—	—	1
Observation Diphtheria .....	1	—	—	—	—	—	—	—	—	2
Scarlet Fever .....	27	1	—	—	—	—	—	2	2	32
Observation Scarlet Fever .....	2	—	—	—	—	—	—	—	—	2
Poliomyelitis .....	1	—	—	—	1	—	—	—	—	2
Meningitis .....	1	—	—	—	—	—	—	—	—	1
Observation Cerebro-spinal Meningitis .....	—	—	—	—	—	—	—	—	1	1
Observation Meningitis .....	1	—	—	—	—	—	—	—	—	1
Enteric Fever .....	—	—	1	—	—	—	—	—	—	1
Vincent's Angina .....	2	—	—	—	—	—	—	—	—	2
Streptococcal Rash .....	—	—	—	—	—	—	1	—	—	1
Measles .....	—	—	—	—	—	1	—	—	—	1
Measles and Bronchitis .....	—	—	—	—	—	1	—	—	—	1
Whooping Cough .....	—	—	—	—	—	—	—	—	1	1
Whooping Cough and Pneumonia .....	1	—	—	—	—	—	—	—	1	2
Erysipelas .....	—	—	—	—	—	—	—	—	1	1
Dysentery .....	—	—	—	1	—	—	—	—	—	1
Amoebic Dysentery .....	—	—	1	—	—	—	—	—	—	1
Chicken-pox .....	—	1	—	1	—	—	—	—	—	2
Mumps .....	1	—	—	—	—	—	—	—	—	1
<b>Totals .....</b>	<b>37</b>	<b>5</b>	<b>3</b>	<b>2</b>	<b>4</b>	<b>6</b>	<b>4</b>	<b>6</b>	<b>57</b>	



